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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/837,895	04/18/2001	John B. Costello	D.N.7152	8364
7590	05/31/2005		EXAMINER	
PAUL M. DENK 763 South New Ballas Rd. St. Louis, MO 63141			NAJARIAN, LENA	
			ART UNIT	PAPER NUMBER
			3626	

DATE MAILED: 05/31/2005

Please find below and/or attached an Office communication concerning this application or proceeding.

Office Action Summary	Application No.	Applicant(s)	
	09/837,895	COSTELLO, JOHN B.	
	Examiner	Art Unit	
	Lena Najarian	3626	

Office Action Summary

-- The MAILING DATE of this communication appears on the cover sheet with the correspondence address --

A SHORTENED STATUTORY PERIOD FOR REPLY IS SET TO EXPIRE 3 MONTH(S) FROM THE MAILING DATE OF THIS COMMUNICATION.

- Extensions of time may be available under the provisions of 37 CFR 1.136(a). In no event, however, may a reply be timely filed after SIX (6) MONTHS from the mailing date of this communication.
- If the period for reply specified above is less than thirty (30) days, a reply within the statutory minimum of thirty (30) days will be considered timely.
- If NO period for reply is specified above, the maximum statutory period will apply and will expire SIX (6) MONTHS from the mailing date of this communication.
- Failure to reply within the set or extended period for reply will, by statute, cause the application to become ABANDONED (35 U.S.C. § 133). Any reply received by the Office later than three months after the mailing date of this communication, even if timely filed, may reduce any earned patent term adjustment. See 37 CFR 1.704(b).

Status

1) Responsive to communication(s) filed on 18 April 2001.

2a) This action is **FINAL**. 2b) This action is non-final.

3) Since this application is in condition for allowance except for formal matters, prosecution as to the merits is closed in accordance with the practice under *Ex parte Quayle*, 1935 C.D. 11, 453 O.G. 213.

Disposition of Claims

4) Claim(s) 1-10 is/are pending in the application.
4a) Of the above claim(s) _____ is/are withdrawn from consideration.

5) Claim(s) _____ is/are allowed.

6) Claim(s) 1-10 is/are rejected.

7) Claim(s) _____ is/are objected to.

8) Claim(s) _____ are subject to restriction and/or election requirement.

Application Papers

9) The specification is objected to by the Examiner.

10) The drawing(s) filed on _____ is/are: a) accepted or b) objected to by the Examiner.

Applicant may not request that any objection to the drawing(s) be held in abeyance. See 37 CFR 1.85(a).

Replacement drawing sheet(s) including the correction is required if the drawing(s) is objected to. See 37 CFR 1.121(d).

11) The oath or declaration is objected to by the Examiner. Note the attached Office Action or form PTO-152.

Priority under 35 U.S.C. § 119

12) Acknowledgment is made of a claim for foreign priority under 35 U.S.C. § 119(a)-(d) or (f).
a) All b) Some * c) None of:
1. Certified copies of the priority documents have been received.
2. Certified copies of the priority documents have been received in Application No. _____.
3. Copies of the certified copies of the priority documents have been received in this National Stage application from the International Bureau (PCT Rule 17.2(a)).

* See the attached detailed Office action for a list of the certified copies not received.

Attachment(s)

1) Notice of References Cited (PTO-892)
2) Notice of Draftsperson's Patent Drawing Review (PTO-948)
3) Information Disclosure Statement(s) (PTO-1449 or PTO/SB/08)
Paper No(s)/Mail Date 20010731.
4) Interview Summary (PTO-413)
Paper No(s)/Mail Date. .
5) Notice of Informal Patent Application (PTO-152)
6) Other: .

DETAILED ACTION

Specification

1. Applicant is reminded of the proper language and format for an abstract of the disclosure.

The abstract should be in narrative form and generally limited to a single paragraph on a separate sheet within the range of 50 to 150 words. It is important that the abstract not exceed 150 words in length since the space provided for the abstract on the computer tape used by the printer is limited. The form and legal phraseology often used in patent claims, such as "means" and "said," should be avoided. The abstract should describe the disclosure sufficiently to assist readers in deciding whether there is a need for consulting the full patent text for details.

The language should be clear and concise and should not repeat information given in the title. It should avoid using phrases which can be implied, such as, "The disclosure concerns," "The disclosure defined by this invention," "The disclosure describes," etc.

The abstract of the disclosure is objected to because its length exceeds 150 words. Correction is required. See MPEP § 608.01(b).

Claim Rejections - 35 USC § 112

2. The following is a quotation of the second paragraph of 35 U.S.C. 112:

The specification shall conclude with one or more claims particularly pointing out and distinctly claiming the subject matter which the applicant regards as his invention.
3. Claims 2-7 and 9-10 are rejected under 35 U.S.C. 112, second paragraph, as being indefinite for failing to particularly point out and distinctly claim the subject matter which applicant regards as the invention.
4. Claims 2-7 and 9-10 recite the limitations for which there is no antecedent basis in the claims. In particular, the following passages lack or have vague antecedent basis:

- (i) "the insurance provider": claim 2, line 2
 - claim 7, line 19
- (ii) "the practitioner's": claim 3, line 4
- (iii) "the specific charges": claim 4, line 2
- (iv) Claims 5 and 6 incorporate the deficiencies of claim 4, through dependency, and are also rejected.
- (v) "the charge sheet records": claim 7, line 13
- (vi) "the physician's visit code": claim 9, line 2
- (vii) "the physician": claim 9, line 3
- (viii) Claim 10 incorporates the deficiencies of claim 9, through dependency, and is also rejected.

Claim Rejections - 35 USC § 102

5. The following is a quotation of the appropriate paragraphs of 35 U.S.C. 102 that form the basis for the rejections under this section made in this Office action:

A person shall be entitled to a patent unless –

(b) the invention was patented or described in a printed publication in this or a foreign country or in public use or on sale in this country, more than one year prior to the date of application for patent in the United States.

6. Claim 7 is rejected under 35 U.S.C. 102(b) as being anticipated by Crane (5,748,907).

(A) Referring to claim 7, Crane discloses a system for creation of an integrated medical record via a communications computer network, comprising:

means for recording the scheduling of a patient's visit, means for recording data relative to the patient's clinical visit, including means for recording the history of the patient and entering data relative to the physical examination of the patient (col. 5, lines 60-65 and 47-52, Table 1 at col. 38, lines 45-63, and col. 1, lines 36-38 of Crane), and means for recording data relating to the diagnosis, testing, and treatment planning for the patient, and means for scheduling the sign-out of the patient, and means for recording the establishment of next visit date, and means for scheduling the studies and referrals relating to the patient (col. 9, lines 29-45 and col. 24, lines 47-54 of Crane; the Examiner interprets "check-out" to be a form of "sign-out");

means for recording data relative to the financial information pertaining to the patient's clinical visit, including means for gathering and verifying the patient's insurance coverage information, means for recording data relative to the patient's visit and treatment upon the charge sheet records establishing the charges for the patient's visit, means for entering said financial data for the visit into a billing system, means for recording the data into the patient's ledger, listing of the patient's charges, and payments to date, and means for generating a statement to the patient for the balance due from the ledger relative to the current and previous visits (col. 5, lines 37-42, col. 7, lines 5-12, and Table 2 at col. 40-41 of Crane); and

means for electronically forwarding upon the computer the data relative to the patient's most current visit, transmitting data to the insurance provider, relative to the services conducted for that visit, and means for processing upon the computer the financial statement, payments made thereto, and the amount of patient billings in

arrears for collection (col. 11, lines 49-53, col. 5, lines 37-42, and col. 34, lines 62-65 of Crane).

Claim Rejections - 35 USC § 103

7. The following is a quotation of 35 U.S.C. 103(a) which forms the basis for all obviousness rejections set forth in this Office action:

(a) A patent may not be obtained though the invention is not identically disclosed or described as set forth in section 102 of this title, if the differences between the subject matter sought to be patented and the prior art are such that the subject matter as a whole would have been obvious at the time the invention was made to a person having ordinary skill in the art to which said subject matter pertains. Patentability shall not be negated by the manner in which the invention was made.

8. Claims 1-6 and 8-10 are rejected under 35 U.S.C. 103(a) as being unpatentable over Crane (5,748,907).

(A) Referring to claim 1, Crane discloses a method and system for creation of an integrated medical patient's record via a communications computer network, including providing a record of standard patient personal and medical history and capable of receiving data pertaining to a specific visit for the patient being treated (Fig. 6, col. 2, lines 59-61, and col. 9, lines 40-45 of Crane; the Examiner interprets "visit summary" to be a form of "data pertaining to a specific visit");

inputting data relative to the personal history of the specific patient to be examined and treated (col. 1, lines 36-38 and col. 2, lines 59-61 of Crane);

inputting data relative to specific medical information determined during the specific patient's examination and visit (col. 9, lines 29-35 of Crane);

providing a record of the patient's diagnosis, studies and treatment during this specific patient visit (col. 9, lines 29-35 and 40-45 of Crane; the Examiner interprets

"summary" to be a form of "record," "test" to be a form of "studies," and "prescription" to be a form of "treatment");

calculating the financial obligations for the specific patient's examination and visit (col. 5, lines 37-42 of Crane; the Examiner interprets "automatically verifies and invoices" to be a form of "calculating");

providing a record for the diagnosis, studies ordered, and treatment for that patient's specific visit (col. 9, lines 29-35 and 40-45 of Crane);

providing on the same record a statement of the patient's and provider's financial obligations for the examination and visit (col. 23, lines 44-51 of Crane); and

storing in memory the statement of the patient's medical history for the visit, and the financial obligations of the patient and provider for the specific patient visit (col. 34, lines 59-65 of Crane).

Crane fails to expressly teach the use of a single page for the record, but doing so would have been an obvious modification to one of ordinary skill in the art at the time of the invention.

The motivation for such a modification would have been to conserve resources (i.e., less printing required; and less waste of paper).

(B) Referring to claim 2, Crane discloses transmitting through a communications network to the insurance provider its financial obligation for the specific patient's examination, treatment, and visit (col. 5, lines 37-42 of Crane).

(C) Referring to claim 3, Crane discloses wherein said step of inputting data relative to the patient's examination including inputting information for recording relating to the

physical examination, inputting data relative to the patient's explanation of symptoms of the present illness (col. 23, lines 1-11 of Crane; the Examiner interprets "interviews the patient" to be a form of "patient's explanation"), recording information relative to the practitioner's diagnosis, studies and tests ordered, and treatments to be given (col. 9, lines 29-35 and Table 1 at col. 38, lines 45-63 of Crane).

(D) Referring to claim 4, Crane discloses including providing in the step of calculating the financial obligation a determination of the specific charges, payments made, and the balance due relative to the patient's examination, treatment and visit (Table 2 at col. 41 and col. 5, lines 37-42 of Crane).

(E) Referring to claim 5, Crane discloses inputting information relative to any outside office tests conducted, the location of the outside office processes (col. 2, line 62 – col. 3, line 6 and col. 4, lines 41-47 of Crane), any prescription medication prescribed, the location of any prescription medication obtained (col. 12, lines 33-41 and col. 9, lines 29-35 of Crane; the Examiner interprets "from the pharmacy" to be a form of "location"), any referral to other specialists for further treatment, and the location of the other specialist (col. 13, lines 43-48 and col. 18, lines 32-37 of Crane), and further examinations, treatments, and visits scheduled for the specific patient (col. 24, lines 46-54 of Crane).

(F) Referring to claim 6, Crane discloses wherein the step of storing in memory includes the provision of initiating a save record button for preserving upon a single record of the medical and financial data relative to the specific patient under medical investigation and treatment (col. 34, lines 59-65 and col. 29, lines 48-51 of Crane; the Examiner

interprets "visit summary" to be a form of "single record" and "Done' function" to be a form of "button").

(G) Referring to claim 8, Crane discloses a method and system for creation of an integrated medical patient's record via a computer, including providing a record of standard patient personal and medical history, and which is capable of receiving data pertaining to a specific visit for the patient being treated (Fig. 6, col. 2, lines 59-61, and col. 9, lines 40-45 of Crane; the Examiner interprets "visit summary" to be a form of "data pertaining to a specific visit");

inputting data relative to the personal history of the specific patient to be examined and treated (col. 1, lines 36-38 and col. 2, lines 59-61 of Crane);

inputting data relative to specific medical information determined during the specific patient's examination and visit (col. 9, lines 29-35 of Crane);

inputting data relative to the patient's diagnosis, studies, treatment and visit charge during that specific patient visit, and inputting the financial requirements needed for medical coverage by the patient's insurance provider and the patient (col. 9, lines 29-35 and 40-45 of Crane; the Examiner interprets "test" to be a form of "studies" and "prescription" to be a form of "treatment");

deriving and calculating the financial obligations regarding the patient's diagnosis, studies, treatment, and visit charges for determining the patient and insurance provider financial obligations (col. 5, lines 37-42 of Crane; the Examiner interprets "automatically verifies and invoices" to be a form of "calculating");

providing a record for said diagnosis, studies, treatment, and examination, and the financial obligations determined for that patient's specific visit (col. 24, lines 47-54 of Crane); and

storing electronically in memory the statement of the patient's medical history for the visit, and the financial obligations of the patient and provider for that specific patient visit (col. 34, lines 59-65 of Crane).

Crane fails to expressly teach the use of a single page for the record, but doing so would have been an obvious modification to one of ordinary skill in the art at the time of the invention.

The motivation for such a modification would have been to conserve resources (i.e., less printing required; and less waste of paper).

(H) Referring to claim 9, Crane discloses the step of inputting data relative to the physician's visit code categorizing the charges made relative to the type of diagnostic study, treatment, and diagnosis provided by the physician for specific patient visit (col. 19, line 64 – col. 20, line 7 of Crane; the Examiner interprets "cost of each specific test" to be a form of "categorizing the charges").

(I) Referring to claim 10, Crane discloses wherein the providing of a record of the patient's diagnostic studies, and diagnosis and the determination of the financial requirements of the allowed medical coverage for the patient's visit are created in a single step by the system (col. 23, lines 43-51 and col. 29, lines 50-51 of Crane).

Conclusion

9. The prior art made of record and not relied upon is considered pertinent to applicant's disclosure. The cited but not applied prior art teaches a healthcare payment, reporting and data processing system and method (US 2002/0062224 A1); and a method and system encoding and processing alternative healthcare provider billing (5,915,241).

10. Any inquiry concerning this communication or earlier communications from the examiner should be directed to Lena Najarian whose telephone number is (571) 272-7072. The examiner can normally be reached on Monday - Friday, 8:30 am - 5:00 pm.

If attempts to reach the examiner by telephone are unsuccessful, the examiner's supervisor, Joseph Thomas can be reached on (571) 272-6776. The fax phone number for the organization where this application or proceeding is assigned is 703-872-9306.

Information regarding the status of an application may be obtained from the Patent Application Information Retrieval (PAIR) system. Status information for published applications may be obtained from either Private PAIR or Public PAIR. Status information for unpublished applications is available through Private PAIR only. For more information about the PAIR system, see <http://pair-direct.uspto.gov>. Should you have questions on access to the Private PAIR system, contact the Electronic Business Center (EBC) at 866-217-9197 (toll-free).

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